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PTO/SB/01 (12-97)
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 5/1275

First Named Inventor Gerald Juergen ROTH

COMPLETE IF KNOWN

Application Number 09 / 678,682

Filing Date 10/03/00

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SUBSTITUTED INDOLINES WHICH INHIBIT RECEPTOR TYROSINE KINASES

the specification of which

(Title of the Invention)

☐ is attached hereto
OR

☐ was filed on (MM/DD/YYYY) 10/03/00 as United States Application Number or PCT International

Application Number 09/678,682 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
DE 199 49 208.5	Germany	10/13/1999	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DE 100 42 696.4	Germany	08/31/2000	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/160,547	10/20/1999	

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number 000023703 →

Place Customer Number Bar Code Label here

OR
☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Robert P. Raymond	25,089	Susan K. Pocchiari	45,016
Alan R. Stempel	28,991	Philip I. Datlow	41,482
Mary-Ellen M. Devlin	27,928	Timothy X. Witkowski	40,232
Anthony P. Bottino	41,629		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

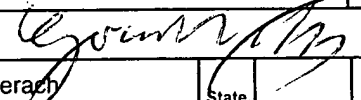
Direct all correspondence to: ☐ Customer Number 000023703 OR ☐ Correspondence address below

Name	Robert P. Raymond				
Address	Boehringer Ingelheim Corporation				
Address	900 Ridgebury Road, P. O. Box 368				
City	Ridgefield	State	CT	ZIP	06877-0368
Country	US	Telephone	203/798-9988	Fax	203/798-4408

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Gerald Juergen	ROTH

Inventor's Signature				Date	11/06/00
Residence: City	Biberach	State		Country	Germany
Post Office Address	Akazienweg 47				
Post Office Address					
City	Biberach	State		ZIP	D-88400
				Country	Germany

☐ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Armin				HECKEL			
Inventor's Signature				Date	11/07/00		
Residence: City	Biberach	State		Country	Germany	Citizenship	DE
Post Office Address	Geschwister-Scholl-Strasse 71						
Post Office Address							
City	Biberach	State		ZIP	D-88400	Country	Germany
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Rainer				WALTER			
Inventor's Signature				Date	11/08/00		
Residence: City	Biberach	State		Country	Germany	Citizenship	DE
Post Office Address	Probstrasse 3						
Post Office Address							
City	Biberach	State		ZIP	D-88400	Country	Germany
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Jacobus				Van MEEL			
Inventor's Signature				Date	11.30.00		
Residence: City	Moedling	State		Country	Austria	Citizenship	NL
Post Office Address	Weisses Kreuz Gasse 61						
Post Office Address							
City	Moedling	State		ZIP	2340	Country	Austria

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
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Given Name (first and middle (if any))	Family Name or Surname
Norbert	REDEMANN

Inventor's Signature		Date	11/08/00
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Residence: City	Biberach	State		Country	Germany	Citizenship	DE
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Post Office Address	Koehlesrain 48
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Post Office Address	
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City	Biberach	State		ZIP	D-88400	Country	Germany
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Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
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Given Name (first and middle (if any))	Family Name or Surname
Ulrike	TONTSCH-GRUNT

Inventor's Signature		Date	23.12.00
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Residence: City	Baden	State		Country	Austria	Citizenship	AT
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Post Office Address	Oetkerweg 23
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Post Office Address	
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City	Baden	State		ZIP	2500	Country	Austria
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Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
---	---

Given Name (first and middle (if any))	Family Name or Surname
Walter	SPEVAK

Inventor's Signature		Date	12/28/00
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Residence: City	Oberrohrbach	State		Country	Austria	Citizenship	AT
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Post Office Address	Leoberndorferstrasse 36
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Post Office Address	
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City	Oberrohrbach	State		ZIP	2105	Country	Austria
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Frank				HILBERG			
Inventor's Signature						Date	30.11.00
Residence: City	Wien	State		Country	Austria	Citizenship	DE
Post Office Address	Pilgramgasse 18/22						
Post Office Address							
City	Wien	State		ZIP	1050	Country	Austria
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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